

Minutes of the Combined Health and Human Services Board & Committee Meeting

Thursday, August 14, 2008

The meeting was called to order at 1:03 p.m. by Chairs Farrell and Paulson.

Pledge of Allegiance

Committee Members Present: Supervisors Duane Paulson (Chair), Pauline Jaske, Gilbert Yerke, Bill Zaborowski, Jim Jeskewitz, Kathleen Cummings and Janel Brandtjen.

Board Members Present: Supervisors Duane Paulson, Janet Brandtjen, James Behrend, Jim Jeskewitz and Citizen Members Dennis Farrell (Chair) Joe Vitale, JoAnn Weidmann, Mike O'Brien. **Absent:** Dr. Peter Parthum and Flor Gonzalez.

Also Present: Chief of Staff Mark Mader, Health and Human Services Director Peter Schuler, HHS Deputy Director Don Maurer, Public Health Manager Dr. Nancy Healy Haney, Aging and Disability Resource Center (ADRC) Director Cathy Bellovary, ADRC Supervisor Mary Smith, Accounting Services Coordinator Cynthia Lilley, Environmental Health Supervisor Steve Korthof, Wisconsin Community Services Court Services Administrator Sara Carpenter, Senior Financial Analyst Clara Daniels, Financial Analyst Bill Duckwitz.

COMMITTEE AGENDA ITEMS

Approve Minutes of May 15, 2008

MOTION: A motion was made by Jim Jeskewitz, seconded by Bill Zaborowski to approve the minutes of May 15, 2008. The motion was voted on and carried 7-0

Approve Minutes of June 26, 2008

MOTION: A motion was made by Pauline Jaske, seconded by Gilbert Yerke to approve the minutes of June 26, 2008. The motion was voted on and carried 7-0.

Executive Committee Report

Paulson stated that the Committee was presented with an update on Information Technology and Information Capital Projects and status of capital projects. He has all the paperwork if anyone is interested in reviewing.

Meeting Approvals

MOTION: A motion was made by Kathleen Cumming, seconded by Pauline Jaske to approve attendance for Committee members to attend the October 30, 2008 meeting. The motion was voted on and carried 7-0.

MOTION: A motion was made by Kathleen Cummings, seconded by Pauline Jaske to approve Committee attendance at the Family Partnership Care Management Coalition event to be held on August 20, 2008 in Dodge County from 10:30 to Noon. The motion was voted on and carried 7-0.

They also received an invitation via e-mail to attend a Harley Davidson event in Oconomowoc on August 23, 2008

BOARD AGENDA ITEMS

Meeting Approvals

MOTION: A motion was made by Joe Vitale seconded by JoAnn Weidmann to attend the National Public Health Performance Standards meeting on October 30, 2008. The motion was voted on and approved 8-0.

MOTION: A motion was made by Jim Behrend seconded by Jim Jeskewitz to attend the Family Partnership Care Management Coalition event to be held on August 20, 2008 in Dodge County from 10:30 to Noon. The motion was voted on and carried 8-0.

Advisory Committee Reports

Farrell noted that the DDAC met for the second to last time and wanted Farrell to address a few items to the Board. The Advisory Committee indicated that they felt they should stay together to develop unmet needs and felt they have value and accomplishments. The CMO's were approached and accepted some of the members for an advisory committee that is being put together under state mandate to the CMO's. However, that still leaves about 30 people in the group. They have somewhat decided to merge and join the "People Can't Wait Coalition", which is an advocacy group. Farrell felt that they could have been kept on as a support group to the CMO. The group will meet once more next month before disbanding. Farrell asked if there is any formal action required by the Board and Mark Mader indicated he will review the code and confer with Corporation Counsel to make sure correct procedure is followed.

Weidmann stated that the Public Health Advisory Committee met this morning and discussed the budget. WALHDAB met Wednesday and there is a survey on the health of Wisconsin that's going to be done under a grant from the UW Madison Medical School. There will be three smaller census blocks, one in Muskego, Oconomowoc and Elm Grove and families will be queried as to their interest in survey participation. The survey will be looking at asthma, dental visits, cigarette smoking by adults, physical activity by adults, intake of fruits and vegetables, etc. WALHDAB is also working on what they are going to focus on for the upcoming year – obesity, health insurance, dental visits, etc. Weidmann also shared a question raised at the Advisory Committee meeting regarding a replacement of an Environmental Health representative at their meetings. Schuler will talk to Dale Shaver about a replacement.

Review of the CJCC Budget

Schuler introduced Sara Carpenter from Wisconsin Community Services and Cynthia Lilley who will be assisting him in presenting the CJCC budget. Schuler stated they will be interviewing the final two candidates for the CJCC Coordinator position on August 18th. An offer will be made after that date and they are expecting the candidate to start working sometime in late September or early October.

Schuler gave a brief history of the CJCC for the new members of the Board and Committee and reviewed the Program Description and the Council's Statement of Purpose. He then reviewed the budget figures which showed the changes in revenues and expenses and a decrease in position count of 0.21. The decrease in general government revenue has to do with the ending of the Alcohol Treatment Court grant from the federal government. This was a three year grant

which will soon end. Another \$25,000 of the general government revenue decline has to do with the ending of the state homeless grant. In order to maintain the treatment court, new tax levy was put into the budget in combination with the carryover dollars from the grant of about \$47,000 and \$18,778 which represents the 2008 level of State Department Community Corrections cost share of the WCS Community Service Options Contract.

Carpenter described the Alcohol Treatment Court. This program is a very intensive long term post sentence program. The goal of the program is to provide 3rd offense repeat drunk drivers the support they need to break the cycle and to help them with long term sobriety. An individual goes through four phases. There is intensive judicial review with this program and initially participants must attend court every Thursday and as they move through the phases their level of court appearances is reduced. Numerous requirements are included in their supervision plan to ensure proper monitoring and supervision, and provision of support needed to move forward. When an individual initially reports in, they are on SCRAM for a period of 15 days and then removed based on compliance. After SCRAM they continue to be randomly tested for alcohol and/or drug use when its determined necessary. They are also required to attend support groups such as AA. The program makes sure individual's treatment issues are addressed to meet their needs. They look at their employment, family, support system, their community ties, their responsibilities within their lives in order to develop effective supervision plans to be able to appropriately supervise these individuals. They deal with the whole person to insure a high rate of success. Sara passed around booklets that identify all their programs and she also brought along recent statistics. There is a high rate of success. Since program inception there are been a total of 59 discharges and 59 participants who closed out of the program. There were 48 who successfully graduated which is an 81% success rate. Eleven were discharged from the program, but only two of those re-offended. Six of the 11 voluntarily decided to leave the program and do their jail time instead. When we look at this population, they have serious addiction issues which need to be addressed. The success rate is attributed to the program and review of the treatment court judge and the treatment court team. It is a voluntary program with many requirements. Most offenders don't have a drivers license and they have a job so it is very difficult. There were 3 that were discharged from the program based on a decision of the alcohol treatment court team which includes the case managers, District Attorney, Judge, and Public Defender. There are three participants graduating today and all of you have received an invitation to attend the ceremony this afternoon.

O'Brien stated that he thinks the success rate is phenomenal and many in the jail wish it were available to second offense drunk drivers. He was really impressed with the comprehensive case management.

Schuler stated an evaluation that is currently being done by a formal evaluator from Temple University. This evaluation will continue through this year which will give more data than what we currently have. Carpenter stated they do set up an after care plan after they have completed supervision. Brandtjen asked about the figures on page 53 under Alcohol Treatment Court, about the difference in numbers given by Sara and the 2008 estimate. Carpenter responded that by the end of 2008 they will have served a total of 67 and right now they are at 59. Schuler explained that when the program began they had a large number of referrals and therefore large graduation class. They continue to get new referrals but not all at once and they are now using an application process and with referrals more gradual, graduation numbers are smaller. Cummings would like a program highlight added that would show where they are at when the budget pages are done.

All participants must spend at least 2 weeks in jail/Huber, then 15 days on SCRAM so there are few disruptions to their employment. If we just lock them up we are not working on the underlying problems. Jaske asked how many 3rd offense drunk driving offenses we had in this county. Sara can provide the numbers they supervise pre-trial for 3rd offense drunk drivers. Second offense drunk drivers make up 60% of their pre-trial intoxicated driver intervention caseload. They served 250 3rd offense drunk drivers in 2007 which is almost 30% of the caseload. Schuler stated that Judge Davis asked him to meet with Judge Ramirez regarding a special study group looking at the intoxicated driver issue. The workgroup met 5 or 6 times but is presently not meeting because of working on the budget. They would be glad to come back and provide you with the information on the number of offenses occurring and the trends, etc. This county has the second highest number of intoxicated driving offenses in the State. Milwaukee County is number one but not by much. We have more on a per capita basis than Milwaukee.

Schuler then continued going over the budget figures. Personnel costs reflect the re-classification of the Coordinator position to a different pay range. After having the experience of having a coordinator for 5 years they realized that the skill levels are much higher than when we originally hired a Coordinator. Operating expenses decrease because WCS will operate the treatment court for less than what we had been operating under the grant proposal. Interdepartmental charges are for phones, computers, and fax access.

Under Activities, other services were reviewed. There is also the Community Services Options Program which is described in the booklet. The other programs Schuler and Carpenter reviewed were the Community Transition Program, Operating After Revocation Program, Pretrial Screening Program, Pretrial Supervision Program, Day Reporting Center, Pretrial Program for the Intoxicated Driver, Waukesha County Jail Alcohol and Other Drug Abuse Services and the Adult Basic Education Waukesha County Jail, and it was noted that additional detail about these programs is provided in the booklet handed out. Carpenter gave a brief review of the programs run by Wisconsin Community Services. The OAR program helps people who have had their license taken away and what they need in order to get their license back. It enables them to maneuver the DMV site which is very difficult and the common person would have a hard time navigating it. It helps them move through the court system in order to get their license back. The Pretrial Screening Program helps the court with release decisions, who is eligible for treatment court, and who should be referred. The goal of the Pretrial Supervision Program is to insure that individuals appear at their court hearings and comply with conditions of bail and more toward adjudication. The Pretrial Program for Intoxicated Driver serves all repeat offenders in Waukesha County. There are specific supervision plans put into place pre-trial including appearing in court and participating in programs in order to reduce repeat drunken driving charges. The length of stay is generally 6 months to a year and they are intensively supervised. Schuler noted that there is a change on page 56 under Objective 1 under key outcome indicator, the second bullet point should be 17,205 jail days served in 2007.

Schuler continued the presentation with the Day Reporting Program which was created in April of 2008, and in response to a Council road trip to another county and how this program relieved their jail population. The program received individuals from the Huber Facility and now direct court referrals from the Judge. The purpose of the program is to provide the same services, but they are not placed in Huber custody. It has been very successful, is operating with a fairly high number of clients and has fulfilled the original vision. The Community Transition Program was

the first program created by the Criminal Justice Council. It is a program in which the Jail and Human Services work together with those individuals who had the highest recidivism rates. These individuals are not serious offenders, but are mostly nuisance offenders with many having mental health and substance abuse problems with few resources. Shirlee Bedard is the core person who supervises these individuals in the community. The grant money (the homeless grant) that funds the half-time worker in the jail who helps those who are to be released was lost. This program could be at least three times larger than it is and it still would not cover everyone who is recidivating in the jail. Various parties have appealed to the County Executive to maintain this program and it is presently under consideration. A recidivism rate of 78 – 82% has been reduced to 38% after the first year.

The Waukesha County Jail Alcohol and Other Drug Abuse Services is part of the larger jail medical service contract. Those staff intervene in the jail when there are emergency alcohol and other drug abuse and mental health crises and with individuals whose behaviors require jail based help. Several years ago the Sheriff's Department was going to cut this program and it was subsequently moved under the auspice of the Council.

Adult Basic Education Program in the jail has been provided through WCTC for a long time. At one time the Sheriff's Department was looking at ending this program for budgetary reasons and it was transferred to the CJCC in insure continued operations. It helps people get their adult education needs met, including possible attainment of a GED or HSED certificate. It has worked with literacy and pre-employment skill building. WCTC helps fund this program and for the first time in 15 years they have lost their grant from the state. They did some fund-raising to make up for the lost grant monies and applied for a WIRED grant from a national pool of money to help improve employment in the State and are hoping to acquire grant funding to restore capacity. Workforce Development Center also applied for a WIRED grant which they did receive to provide employment services in the jail and Huber and to Probation and Parole clients. The grant will begin in October and that will be added to the budget book. The grant was close to \$80,000 with a \$5,000 match requirement. The WIRED grant is for one year at which time the program will need to be reviewed, and based on the outcome and funding, a determination will be made whether to continue.

MOTION: Paulson made a motion seconded by Weidmann to accept the proposed budget for the CJCC. All voted and the motion passed 8-0.

JOINT AGENDA ITEMS

First Governance Standard: Essential Public Health Service #1 – Monitoring Health Status to Identify Community Health Problems

All members were given a binder with tabs for all ten of the essential services. At the end of each meeting they will turn their binders in to Dr. Healy. After we finish the 10th standard, everyone will keep their book. Weidmann stated that we addressed the issue of performance standards well over a year ago. This is what the Health Board (Health and Human Service Board, role is and looks at what the department is doing to make sure we are truly meeting the official standards. Instead of doing all at one time, one standard will be addressed at each of the coming meetings. In the booklet will be one or two pieces of evidence regarding satisfaction of the standard. When the State comes in to conduct their 140 Review, they will interview members of the Health and Human Services Board. The National Public Health Performance

Standards (NPHPS) is the pre-cursor to national accreditation of local health departments. However, incorporation of these standards is required because it is in the state statutes.

Essential Service #1 is monitoring the health status to identify community health problems. This means the health division is obligated to know what the health issues are in the county. This is done by compilation and analysis of community health data, to arrive at a community health profile. The leading causes of public health problems must be addressed, along with formation of a community health improvement plan. Waukesha County is the only county health department in the state that did not have a community health plan and it is now a statutory obligation. It will have to be produced in 2009. The accreditation process is going to happen in 2010. Waukesha County's Public Health Division is presently classified as a Level II health department and it is hoped that this state can be kept. Under state statute 251.04, the Board's authority and responsibility is to assess public health needs and advocate for the reasonable and necessary provision of public health services. Also included in the booklets is a Public Health Division Biostatistical Activity Report. Every three years, the division must also produce a health report card which is done in conjunction with the health council. All national statistics and standards that are recommended at a national level and compared with local data. This community continues to have a high level of heart disease, cancer and stroke. While the Public Health Division is the County's agen, they cannot establish policy as that's the Board's responsibility.

Dr. Healy introduced Steve Korthoff, Environmental Health Supervisor. His division's primary responsibility is the licensing and inspection of public establishments such as restaurants, retail food stores, hotels, public swimming pools, campgrounds, etc. They have one full-time humane officer and two on-call humane officers. He works with Schuler periodically on human health hazard issues. He recognized how much they rely on Public Health to do the individual health monitoring. His office will get calls from Public Health that something has happened that might fall that might involve one of their licensed or regulated establishments. The investigation of foodborne illness outbreak really falls under Essential Standards #2. Any monitoring they do is based on a call they will receive from a person who became ill after eating at a certain establishment. In 2007 they had 194 complaints of food establishments and 53 of those complained they got sick from one of those establishments. They investigate every one and if there is an issue that warrants calling public health for a communicable disease they will contact Rosie Kapp or Ben Jones at Public Health and work with them on the issue. They don't have active monitoring per se, given time and resource constraints related to the amount of work they already have with their existing programs. Korthof stated that Essential Service #1 is "flat" as far as Environmental Health involvement. Weidmann felt that as a Board, they should be receiving statistics from Environmental Health. Korthof noted that he will share an in-depth evaluation each year for restaurants and retail food stores which is where they get reports of most illnesses. The don't get reports on water borne diseases because those go to the State Department of Health and the Department of Agriculture. He noted there is a lot of explanation and a lot of statistics. They went from a 20 page code to a 250 page code. What is not addressed in the Health Report Card are air quality and water quality – those areas that fall into environmental areas. Several members indicated need for the health board to know this information, but there is no active surveillance of these areas. Korthof stated that in the 1970's they did test air quality, but that now comes under the Department of Natural Resources. At the request of the Board members, Environmental Health will provide the board with reports throughout the year.

Senior Dining Presentation

Cathy Bellovary handed out some brochures on the ADRC and introduced Mary Smith, who is their Nutrition Supervisor as well as the Supervisor of the Older Americans Act programming. The meals program is funded by the Older Americans Act. It is a federal program and is one of the programs that is not means tested – meaning that according to federal program rules, they don't look at income and assets and it's available to anyone over the age of 60. They currently have 12 dining sites in Waukesha County which are listed in the brochure. Some are in senior apartment complexes, some of which are subsidized, and some in community settings. They are open anywhere from 3 to 5 days a week depending on the need and the area. Each site has a component for home delivered meals, but this requires more eligibility determination as established by the State and Federal Government. She shared an eligibility requirement determination form. One of the main criteria is that they are homebound and unable to drive. They will transport people to the dining sites for socialization purposes which keeps them healthy. For everyone receiving home delivered meals, they do an in-home assessment and part of that includes a nutrition screen. Most people who start on the program have an assessment number of around 11. Everyone is re-assessed after one year and their average re-assessment scores are 8.5 – so they are able to show that with the meals they are able to improve people's health, keep them in their home longer and keep them out of the hospital. After one year, 16.5% of their participants had not been hospitalized during that year. The cost of a one day stay in the hospital is equivalent to one year's worth of meals. They have about 790 people who deliver meals to about 300 – 350 per day. The numbers of people receiving home delivered meals is rapidly rising. As people come off the wait list, additional individuals are served as the ADRC is finding them instead of the clients finding the program.

All of the meals are on a donation basis, meaning there is not a set fee. At the dining sites they have a donation bucket and people put in a donation (suggested donation is \$3.50 per meal). They currently receive an average of \$2.18 per meal, but as everything goes up in cost, they have less income to give for meals. For home delivered meals they suggest a donation of \$4.75 per meal because that includes the meal and volunteer mileage. Each dining site has one paid staff person and the rest are volunteers. As the price of gas goes up so does the mileage costs. In four of their locations instead of delivering five days a week, they deliver 3 days a week, including one hot meal and one frozen for the next day. Paulson asked if we could have a meeting in one of the senior dining sites. Smith answered yes they can do that, but for those under 60 the cost is \$5.00 per meal. He also asked if there is any county funding in the dining program. Smith explained there are two different funding sources in the nutrition program. In the senior dining there is no county levy, it is federally funded along with donations. In the home-delivered meal program there is county tax levy. Their average daily meal count is about 25 people a day at each site, in addition to delivery of about 330 – 350 per day to people's homes in the county. There are six private providers of home delivered meals in Waukesha County. We purchase some of those meals depending on the area. There are probably another 300 meals served each day from these private agencies. If someone is at very high risk we offer a second meal – which is a cold breakfast bag and that is based on funding and need. The average age of people attending dining sites once was 74 and now the majority are in their 80's and above. The percentage of people attending the dining sites who are over 80 is 42%, and 61% of people they serve in the home are over 80.

Administrative Services Division Budget Breakdown

After the budget presentation to the Health and Human Services Board, Supervisor Brandtjen asked if board and committee members could be given a breakdown of that budget and the

number of staff by function. Kutz passed around modified (from the budget) pages that gives the groupings of where those staff fit in. Kutz started by going over the staffing that comes under the Director's Office. He went over the description and highlights. Paulson stated that they really just wanted to know where these 51 people are and what they do. Kutz stated there are 8 in Accounting Services and he shared a description of their responsibilities and discussed the wide array of programs, grants, and funding sources which must be attended to. He did the same for the following areas: Accounts Payable, Accounts Receivable, Information Services and Business Applications Support, Administrative Support in Information Services, and Records Management. For each area a description and highlights section is included on the passed out written pages along with the budget figures.

Yerke asked whether due to the ADRC and phaseout of waiver programs, will there be any ripple effects to changing the number of people in the Administrative Services area budget, or will that just affect social workers and case workers? Maurer noted over several years, positions have been frozen or reduced in this area out of budget necessity, and in the 2008 budget, there was an additional reduction with the other 1/3 being reduced in 2009.

Paulson stated that if anyone has specific questions on certain areas, we can put this back on a future agenda.

Treatment Court Graduation

Members of the Board and Committee then concluded their meeting after attending the Treatment Court Graduation.

Adjournment

MOTION: Brandtjen made a motion seconded by Jaske to adjourn the meeting of the Committee. The motion was voted on and carried 7-0.

MOTION: O'Brien made a motion seconded by Jeskewitz to adjourn the meeting of the Board. The motion was voted on and carried 8-0.

The meeting adjourned at 4:44 p.m.

Minutes recorded by Kathy Leach

Approved on _____
Date